ATTACHMENT 4: PAST PERFORMANCE INFORMATION

27 November 2000

Provide the information requested in this form for each contract/program being described. Provide frank, concise comments regarding your performance on the contracts you identify. Provide a separate completed form for each contract/program submitted.

A. Offeror Name (Company/Division):	
CAGE Code:	
DUNS Number:	
(NOTE: If the company or division performing	this effort is different than the offeror or
the relevance of this effort to the instant acquisi	
company/corporate organizational change, note	•
"Organizational Structure Change History" you	provided as part of your Past
Performance Volume.)	
B. Program Title:	
C. Contract Specifics:	
1. Contracting Agency or Customer	
2. Contract Number	
3. Contract Type	
4. Period of Performance 5. Original Contract \$ Value	(Do not include unexercised options)
	(Do not include unexercised options)
7. If Amounts for 5 and 6 above are different	· · · · · · · · · · · · · · · · · · ·
	, provide a brief description of the reason
D. Brief Description of Effort asPrime or	Subcontractor
	d/or production, or other acquisition phase
D. Brief Description of Effort asPrime or (Please indicate whether it was development and	d/or production, or other acquisition phase
D. Brief Description of Effort asPrime or (Please indicate whether it was development and highlight portions considered most relevant E. Completion Date:	d/or production, or other acquisition phase
D. Brief Description of Effort asPrime or (Please indicate whether it was development and highlight portions considered most relevant E. Completion Date: 1. Original date:	d/or production, or other acquisition phase
D. Brief Description of Effort asPrime or (Please indicate whether it was development and highlight portions considered most relevant E. Completion Date: 1. Original date: 2. Current Schedule:	d/or production, or other acquisition phase
D. Brief Description of Effort asPrime or (Please indicate whether it was development and highlight portions considered most relevant E. Completion Date: 1. Original date:	d/or production, or other acquisition phase

lfilling these same roles.)	
1. Program Manager:	Name Office Address
	Telephone
2. Contracting Officer:	Name Office Address
	Telephone
3. Administrative Contracting Officer	Name Office Address

F. Primary Customer Points of Contact: (For Government contracts, provide current information on all three individuals. For commercial contracts, provide points of contact

G. Address any technical (or other) area about this contract/program considered unique.

Telephone

- H. Specify, by name, any key individual(s) who participated in this program and are proposed to support the instant acquisition. Also, indicate their contractual roles for both acquisitions.
- I. Include relevant information concerning your compliance with FAR 52.219-8, Utilization of Small Business Concerns, on the contract you are submitting.
- J. Identify whether a subcontracting plan was required by the contract you are submitting. If one was required, identify, in percentage terms, the planned versus achieved goals during contract performance. If goals were not met, please explain.
- K. Describe the nature or portion of the work on the proposed effort to be performed by the business entity being reported here. Also, estimate the percentage of the total proposed effort to be performed by this entity and whether this entity will be performing as the prime, subcontractor, or a corporate division related to the prime (define relationship).